



CARRYING CONCEALED DEADLY WEAPONS
PHOTOGRAPH SUBMISSION SHEET

Agency: _____ *ORI:* _____

CCDW License Number: _____

Applicant's Name: _____
(First, Middle Initial, Last)



- ✓ For photo requirements please refer to **502 KAR 11:020**.
- ✓ Verify that person is **not** wearing a **Hat** or **Head covering** or **Sunglasses**.
- ✓ **Tape** the photo along the top and bottom in the area provided above.
- ✓ Attach this sheet to the renewal notice with a paperclip.
- ✓ Please do not staple.